

BULLETIN

of the

MAHONING COUNTY MEDICAL SOCIETY

Volume XLIV

OCTOBER, 1974

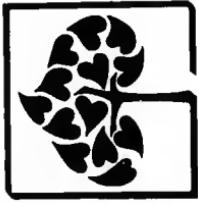
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Mahoning County Medical Society Meetings — 1974

| January | March | May | September | November | December |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 2 3 4 5 | 1 2 3 4 5 | 1 2 3 4 | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 |
| 6 7 8 9 10 11 12 | 3 4 5 6 7 8 9 | 5 6 7 8 9 10 11 | 8 9 10 11 12 13 14 | 3 4 5 6 7 8 9 | 8 9 10 11 12 13 14 |
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| 20 21 22 23 24 25 26 | 17 18 19 20 21 22 23 | 19 20 21 22 23 24 25 | 22 23 24 25 26 27 28 | 17 18 19 20 21 22 23 | 22 23 24 25 26 27 28 |
| 27 28 29 30 31 | 24 25 26 27 28 29 30 | 26 27 28 29 30 31 | 29 30 | 24 25 26 27 28 29 30 | 29 30 31 |

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From the Desk of the President



THE TOP OF THE MOUNTAIN **(The Role of the Medical Auxiliary)**

The intent here is not to alter the autonomy, desires, goals or purpose of the role of our Medical Auxiliary but rather to suggest and recommend a direction whereby the Auxiliary may contribute significantly in assisting the Medical Society in defending and preserving the private practice of medicine.

The doctors of the Medical Society work long, hard hours to provide for their families. They have invested large sums of money and many years of study to attain proficiency in their chosen profession. Many doctors spend an appreciable amount of time providing free or below cost medical services to patients. Many also spend a large part of their "free time" for organized medicine at no compensation and indeed frequently spend large sums of money attending meetings, conferences, writing, incurring costs of secretaries, postage, stationery, etc.

To participate effectively and to accomplish our goals requires an enormous amount of reading and thinking to understand the problems being faced today and to formulate sound opinions and policies. Herein lies an opportunity for our wives to help the busy and overburdened doctors. They could be most helpful in clipping, filing, outlining and summarizing the literature received by the doctor. In this way the Auxiliary would become informed and accomplished and be able to bring to the attention of their husbands good information so that they too would become informed and versatile regarding important issues.

There are a number of so-called "Throw Away" magazines and newspapers that are mailed to the physician's office. If these were instead sent to the home where the Auxiliary member would have possession and access to this material then our mutual concern and effort could be strengthened.

A partial list of material is as follows:

| | |
|---------------------------------|---|
| 1. Journal of the A.M.A. (JAMA) | 8. American Medical News |
| 2. O.S.M.A. Journal | 9. Am. Assn. Of Physicians & Surgeons—(Bulletins) |
| 3. Private Practice | 10. Council of Medical Staff bulletins |
| 4. Prism | 11. Perspective |
| 5. Wall Street Journal | |
| 6. Youngstown Vindicator | |
| 7. Medical Economics | |

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BULLETIN

of the Mahoning County Medical Society

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Volume XLIV

OCTOBER, 1974

Number 10

The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial staff nor the official views of the Mahoning County Medical Society.

EDITOR

Louis Bloomberg, M.D.

ASSOCIATE EDITORS

J. L. Fisher, M.D.
D. H. Levy, M.D.

J. C. Melnick, M.D.
F. A. Pesa, M.D.

Editorial

FEW ARE DISHONEST

For the past two years a group of Utah doctors have been checking on physicians and their private and Medicaid patients for the state and third party carriers in PSRO style monitoring. So far they have reviewed over 32,000 cases and have found grounds for denying payment in only 47 instances. This review cost over \$600,000. This is an example of government cost control.

Laws, certificates, regulations and restraints, however, have never yet succeeded in legislating morality, competence or integrity and I doubt they ever will. Even our severest critics freely acknowledge that morality, competence and integrity flourish in even today's beleaguered world of medicine on a scale unmatched by any other profession in our society. Certainly the same cannot be said of the politicians who propose to reform us.

Because, at most, 5% of physicians have been guilty of lapses in morality in their practices the other 95% of physicians will be under government control and it will be interesting to see how the remaining 95% will fare in an atmosphere of recrimination, regulation and control. No amount of policing and tax supported medical care will influence the multiple disease breeding pockets of poverty in the U.S., the alienating and inhuman housing of the inner cities, the malnutrition of such blighted areas as Appalachia, etc., the drug addicts and the alcoholics, not to mention the erosion of our private and public morals which when taken together do more to harm the health of Americans than do all the failures of the delivery of medical service. PSRO can in no way solve the problems mentioned above but will, as in so many government controlled projects, be a pain in the American pocketbook!

—Louis Bloomberg, M.D.
Editor

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GOVERNOR'S TASK FORCE DISCUSSED



Dr. Lieber shows 8 volumes of report to Dr. Melnick and Dr. White.

explained the workings of the task force, before which he, himself, testified on behalf of medicine. He spoke of the size of the report and showed the 180-page final report along with seven or eight technical appendices.

The task force recommendations include a reorganization of the health department in the state, which would do away with local health departments; a strong plea for prepaid practice organizations; a takeover of Blue Cross and the phasing out of Blue Shield; and control of all post graduate education under the Board of Regents. There are many other phases to the task force report, and these may be read in the Minority Report prepared by William R. Schultz, M.D. and Peter Lancione, M.D. and published in the March issue of the *Ohio State Medical Journal*.

In other business, the Medical Society approved a change in the constitution that will provide for stiffer requirements for the offices of Delegate and Alternate Delegate to the Ohio State Medical Association.

Dr. Anthony Mario Marinelli Jr. was elected to Intern-resident membership in the Mahoning County Medical Society.

Dr. Lieber was introduced by Dr. C. Conner White, program chairman. Dr. John C. Melnick, president, presided.

OSMA AND MCMS OPPOSE PSRO INVOLVEMENT

Members looking for guidance and advice in regard to mailings that they have been receiving from an organization known as Region Six Peer Review Corporation, Akron, may wish to consider the stand taken by the Ohio State Medical Association and the Mahoning County Medical Society.

The OSMA House of Delegates adopted, at the May 15, 1974 meeting of the House in Cleveland, Resolution 23-74, which, printed in the July issue of the *Ohio State Medical Journal*, page 453, states: RESOLVED, That the Ohio State Medical Association advise its members not to involve themselves in the implementation of any form of government controlled peer review as exemplified by the professional standards review section of P. L. 92-603.

The Mahoning County Medical Society stand is essentially the same. At the November, 1973 meeting of the Medical Society, the resolution passed (with one dissenting vote) stated: RESOLVED, That the Mahoning County Medical Society completely reject the concept of the Professional Standards Review section of Public Law 92-603 and . . . urge its members not to participate in any form of government controlled peer review as exemplified by the Professional Standards Review section of Public Law 92-603. The resolution is printed in the December, 1973, issue of the *Bulletin* on page 280.

Region Six Peer Review Corporation accepted a PSRO development contract from HEW on July 1st, according to their literature.

"If the recommendations of the Governor's Task Force on Health are implemented, along with a National Health Insurance program, it will make for more difference in the way we practice medicine and the way our patients are treated than anything that has happened in the last hundred years of medicine," Dr. Maurice Lieber reported at the Sept. 17th meeting of the Mahoning County Medical Society.

Addressing an audience of approximately 60, including members and wives, at the Youngstown Club, he

FROM THE DESK OF THE PRESIDENT

(Continued from Page 218)

This is an enormous amount of reading necessary to get the facts. Our doctors work from 50 to 65 hours per week. How much time is left for the review and absorption of necessary reading? Our opponents are full-time paid bureaucrats, politicians and do-gooders whose entire day and efforts are to attack and subdue the private practice of medicine. There are thousands working daily for years to put medicine under the control of government bureaucracy. They are paid and subsidized by taxpayers' money to accomplish this task. They have the time, the staff, numbering in the thousands, and hundreds of millions of dollars at their disposal.

The doctor has himself and his after-tax dollars to fight against this onslaught. Thus one can readily see an important role for the wives to assist in bringing to the doctors' attention the necessary information, urge their attendance at medical meetings, assist in telephone communication to arrange meetings, develop letter campaigns to our representatives in government, write letters to the editor to reach the public, coordinate the legislative committee of the Auxiliary with the appropriate committee of the Society, develop Auxiliary speakers and Society speakers to reach various clubs and organizations on such topics as N.H.I., HMO, PSRO, Governor's Task Force, invasion of privacy, socialized medicine and others.

Let's climb the mountain together, a long, hard climb, to reach the summit and see from whence we came and where we are going. Attain a panoramic view of all the issues and perhaps see clearer and farther than in the valley where the visibility is obscured.

—John C. Melnick, M.D.
President

HAPPY BIRTHDAY



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| | | | | | |
|---------|---------------------|---------|-----------------|---------|----------------|
| Oct. 17 | J. Malkoff | Oct. 28 | I. H. Chevlen | Nov. 5 | V. Lepore |
| Oct. 18 | C. A. Sarantopoulos | | M. M. Szucs | Nov. 6 | L. O. Gregg |
| Oct. 19 | L. C. Zeller | Oct. 29 | F. K. Inui | Nov. 9 | J. B. Birch |
| Oct. 20 | U. A. Melaragno | | Y. P. Sheen | Nov. 10 | J. C. Melnick |
| Oct. 21 | J. W. Finn | Nov. 2 | R. A. Abdu | | N. K. Badjatiz |
| Oct. 24 | H. E. Fusselman | Nov. 3 | D. R. Brody | Nov. 11 | H. Schmid |
| Oct. 25 | P. L. Jones | | R. J. Brocker | Nov. 15 | J. P. Kalfas |
| | | Nov. 4 | K. J. Hovanic | | J. S. Gregori |
| | | | R. A. Hernandez | | R. W. Juvancic |

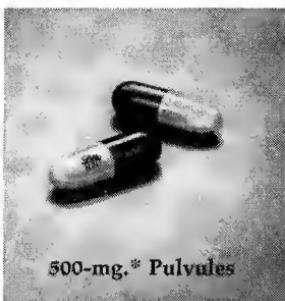
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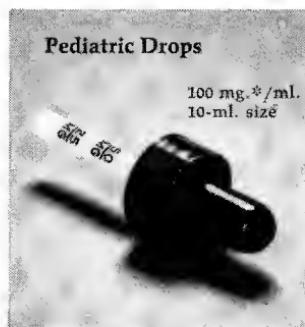


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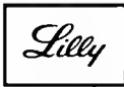
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IMMUNIZATION SCHEDULE

October being Immunization Month, the following schedule from the American Academy of Pediatrics is printed for your information:

TABLE 1
RECOMMENDED SCHEDULE FOR ACTIVE IMMUNIZATION
OF NORMAL INFANTS AND CHILDREN

| | | |
|----------|--|--|
| 2 mo | DTP ¹ | TOPV ² |
| 4 mo | DTP | TOPV |
| 6 mo | DTP | TOPV |
| 1 yr | Measles ³ Rubella ³ | Tuberculin Test ⁴ Mumps ³ |
| 1½ yr | DTP | TOPV |
| 4-6 yr | DTP | TOPV |
| 14-16 yr | Td ⁵ | and thereafter every 10 years |

¹DTP—diphtheria and tetanus toxoids combined with pertussis vaccine.

²TOPV—trivalent oral poliovirus vaccine. This recommendation is suitable for breast-fed as well as bottle-fed infants.

³May be given at 1 year as measles-rubella or measles-mumps-rubella combined vaccines (see Rubella, section 9, and Mumps, section 9, for further discussion of age of administration).

⁴Frequency of repeated tuberculin tests depends on risk of exposure of the child and on the prevalence of tuberculosis in the population group. The initial test should be at the time of, or preceding, the measles immunization.

⁵Td—combined tetanus and diphtheria toxoids (adult type) for those more than 6 years of age in contrast to diphtheria and tetanus (DT) which contains a larger amount of diphtheria antigen. *Tetanus toxoid at time of injury:* For clean, minor wounds, no booster dose is needed by a fully immunized child unless more than 10 years have elapsed since the last dose. For contaminated wounds, a booster dose should be given if more than 5 years have elapsed since the last dose.

Storage of Vaccines

Because biologics are of varying stability, the manufacturers' recommendations for optimal storage conditions (e.g., temperature, light) should be carefully followed. Failure to observe these precautions may significantly reduce the potency and effectiveness of the vaccines.

TABLE 2
PRIMARY IMMUNIZATION FOR CHILDREN
NOT IMMUNIZED IN INFANCY*

1 Through 5 Years of Age

| | |
|-------------------------------|----------------------------|
| First visit | DTP, TOPV, Tuberculin Test |
| 1 mo later | Measles, Rubella, Mumps |
| 2 mo later | DTP, TOPV |
| 4 mo later | DTP, TOPV |
| 6 to 12 mo later or preschool | DTP, TOPV |
| Age, 14-16 yr | Td—continue every 10 years |

6 Years of Age and Over

| | |
|------------------|----------------------------|
| First visit | TD, TOPV, Tuberculin Test |
| 1 mo later | Measles, Rubella, Mumps |
| 2 mo later | Td, TOPV |
| 6 to 12 mo later | Td, TOPV |
| Age, 14-16 yr | Td—continue every 10 years |

* Physicians may choose to alter the sequence of these schedules if specific infections are prevalent at the time. For example, measles vaccine might be given on the first visit if an epidemic is underway in the community.

LARGE ATTENDANCE AT AUXILIARY CLAMBAKE

Credit the Woman's Auxiliary with another triumph. The New England Clambake, held Thursday, Sept. 19, at Fonderlac Country Club will long be remembered by the more than 150 persons who attended.

The evening held several highlights. The highlight for gourmets was the dinner of lobster, clams and chicken. The cultural highlight was the presentation of a group of dances of the Philippines, executed with exceeding grace by some of our members and their wives. Among the dancers were: Dr. Robert Bacani, Dr. and Mrs. J. V. Chavez, Dr. Asuncion Atienza, Dr. Manuel Pecana, Dr. and Mrs. Narciso Domingo and Miss Vicky Remolador.

Mrs. Robert Gilliland, president, introduced her chairmen for the evening. Mrs. Anthony Deramo, social chairman, and Mrs. Robert Barton, program chairman. Members of the committee were Mrs. I. Maeda, Mrs. R. A. Wiltsie and Mrs. William Martin.

The weather cooperated to provide a beautiful setting for the tables by the pool and overlooking the lake for dinner. All in all, it was quite an evening.



Mrs. Deramo, Mrs. Gilliland, and Mrs. Barton.



(Lower left) Dr. Moskalik and Dr. Bacani attempt to emulate a difficult step without getting tripped by the bamboo poles which were part of the dance routine.



AMERICAN FEDERATION OF PHYSICIANS AND DENTISTS

OHIO CHAPTER

MEETING: Tuesday, Nov. 12th

Place: Metropolitan Bank Bldg.

Hubbard, Ohio 7:30 p.m.

PREAMBLE

We, physicians and dentists, being desirous of providing optimum professional care for our fellow man, recognizing as we do that we are involved in the history of the changing times and ways of our country, and recognizing the increased needs of men and women and children for better and more adequate facilities wherein they can be the recipients of our professional training, and we being desirous of giving ourselves without hindrance or let by outside agencies or individuals, and also being deeply concerned for the welfare of our patients; and further recognizing the fact that all men and women are entitled to and should be granted adequate compensation for their contribution and also recognizing that only in and through a united effort can we be assured of receiving full and just compensation and due appreciation for our services, do hereby band together and establish this national union.

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In Memoriam

JAMES L. CALVIN, M.D. 1923 - 1974

Dr. James L. Calvin, director of the cardiovascular laboratory at Youngstown Hospital Association, died of a lung tumor on Tuesday, Sept. 10, at North Side Hospital.

Dr. Calvin was born at Salineville, where he attended elementary and high school. His grandfather and his great-grandfather were both physicians.

He attended Mount Union College and received his medical degree at Western Reserve School of Medicine in 1947. He interned at Grasslands Hospital, Valhalla, N.Y., and took a three-year residency in internal medicine at Youngstown Hospital under Dr. William H. Bunn, Sr. Following his residency he served two years with the U.S. Army in Korea and saw active duty as a battalion surgeon on Heartbreak Ridge.

He returned to Youngstown in 1953 and established an office for the practice of medicine at 3718 Market St. He became director of training in internal medicine at Youngstown Hospital. He was certified by the American Board of Internal Medicine in 1954.

In April, 1961, he was given a one-year appointment as a special U.S. Public Health Fellow in Cardiology at Georgetown University Medical School under Dr. W. Proctor Harvey. He returned to Youngstown to help establish and take charge of a heart laboratory at the North Unit. As the laboratory outgrew its quarters a wing known as the Medical annex was added in 1965.

In 1968 he was elected a Fellow of the American College of Cardiology. He was one of the few physicians who had the additional certification in cardiovascular disease by the American Board of Internal Medicine. He was a member of the American College of Physicians since 1963.

He was a member of Alpha Tau Omega, Nu Sigma Nu and Phi Sigma Fraternities, and was a Board Member of the Youngstown Area Heart Association.

His fellow physicians can only mourn "too young" at this passing away of a 51-year-old doctor whose accomplishments were so important to medicine in Mahoning County. His absence leaves a void that will not soon be forgotten.

The family asks that remembrances take the form of contributions to the Cardiovascular Laboratory at Youngstown Hospital. Checks may be made payable to Youngstown Hospital Association, with a notation on the check that it is for the Dr. James L. Calvin Memorial Fund. Mail to Dr. R. A. Wiltzie, Medical Director, South Unit.

MEDICAL HISTORY IS SCARCE BOOK

Today, two years after publication, the book, "History of Medicine in Youngstown and Mahoning Valley," has become a scarce item. Written during the centennial year of the Medical Society, 1972, the book is a fascinating compilation of medical history and anecdotes about Mahoning County physicians from the arrival of Dr. Dutton in 1801 until the latest bit of hospital construction in 1972.

The book was published in early 1973 by Dr. John Melnick, who wrote the majority of material in the book. The Mahoning County Medical Society may be the only medical society in the country that has its history written in book form. A very few copies of the book are still available at the medical society office.

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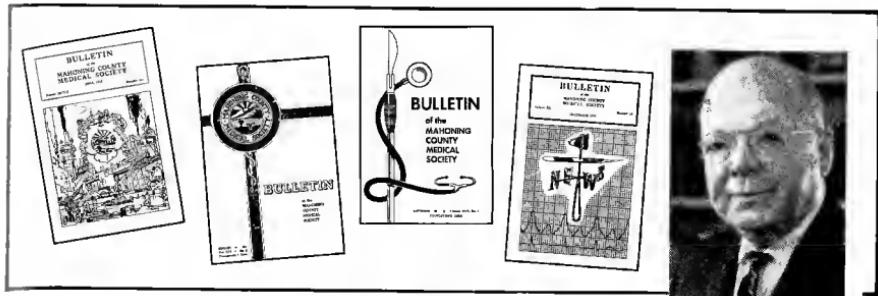


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From the Bulletin

FORTY YEARS AGO — OCTOBER, 1934

Dr. Ralph Morral started practice in 1913; John Buchanan and Ray Fenton in 1914; W. A. Allsop and Dean Nesbit in 1916; D. M. Rothrock, A. Rosapepe, G. A. Parillo and Clarence Stefanski in 1917; J. L. Fisher and Paul Fuzy in 1918; D. A. Gross, Wm. Skipp and Wm. Welsh in 1919; Harry Fusselman and Vern Neel in 1920; E. J. Reilly, Edgar Baker, B. J. Dreiling and J. P. Harvey in 1921. Of all those old timers, five are living and two are still in practice.

Dr. McClenahan of the Public Health Committee urged the doctors to see that all children were immunized against diphtheria. For those unable to pay, the Health Department would supply the Toxoid and pay the physician fifty cents for each immunization. There were no vaccines for polio, pertussis or measles.

The Medical Economics Committee announced that the cost of treating indigent families under the State Relief Plan had exceeded the allotment of seventy cents per family.

THIRTY YEARS AGO — OCTOBER, 1944

Captain Barclay Brandmiller was heard from down in New Guinea. Others were too occupied with the grim struggle to write many letters. In Europe, Paris had been liberated; in the Pacific the Philippines were being invaded and the fighting on Leyte Gulf was bitter. Captain DeCicco was there on the beach, diving into foxholes during air raids.

At home President Roosevelt, in very poor health, was campaigning for his fourth term. The government was making it tough for the doctors, claiming that medical care was inadequate for low income groups and pushing compulsory socialized medicine.

With so many doctors at war, medical care was inadequate for nearly everybody. Doctors were trying frantically to meet their obligations and stave off government regimentation.

TWENTY YEARS AGO — OCTOBER, 1954

The Bulletin said that a union between Doctors of Medicine and Osteopaths would be an unholy syzygy. Actually, there is such a word.

It is pronounced "siz-i-jee" and means "a joining together."

New members that month were: Simon W. Chiasson, Paul A. Dobson, Donald R. Dockry, Ulrich H. Boening and Paul Fuzy, Jr.

Edward M. Thomas was certified by the American Board of Urology. President Detesco was at Mount Sinai Hospital for a course in cardiovascular disease.

The Scott Company advertised fancy vests for \$13.50 up in silk, flannel or corduroy.

TEN YEARS AGO — OCTOBER, 1964

A Clinical-Pastoral Conference, first of its kind in the United States, was held by the Mahoning County Medical Society on Sept. 23 at Youngstown

South Side Hospital. Seventy persons, including both physicians and clergymen, attended the meeting.

Dr. F. L. Schellhase presented the protocol. Following comments by several physicians directly involved in the case, the entire group participated in questions and answers and discussion about the role of both medicine and religion in the problems presented by the case.

Observing the new approach was Arne Larson, Asst. Dir. of the Dept. of Medicine and Religion, American Medical Association, who came to Youngstown specifically for the meeting. The conference was planned by the Medicine and Religion Committee, R. M. Kiskaddon, chairman.

Great preparation was under way for the Sixth District Post-Graduate Day coming up that month. Mahoning County was to be the host. More about it next month.

New members were: Frank James Kocab, Samuel G. Adornato, Demetrius J. Dallis, Milosav Petrovich, William Robert Torok and John F. Kroner.

J. L. F.

WHAT IS AMA-ERF?

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SEN. ARONOFF IS NOVEMBER SPEAKER

Ohio State Senator Stanley J. Aronoff will address the members and wives of the Mahoning County Medical Society at the next meeting, Tuesday, Nov. 19 at the Youngstown Club. Senator Aronoff will speak on confidentiality of medical records, particularly as affected by the PSRO law. Further plans for the meeting will be announced by program chairman, Dr. C. Conner White.

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PROCEEDINGS OF COUNCIL

Sept. 10, 1974

The regular meeting of the council of the Mahoning County Medical Society was held on Tuesday, Sept. 10, 1974 at the Youngstown Club.

Dr. Corredor, president of the newly formed Mahoning Valley Chapter of the American Diabetes Association, spoke concerning that organization's plans, which include public education, diabetes tests, research and funding. The motion was made by Dr. Pichette and properly seconded that the Mahoning County Medical Society will approve no screening program for any organization unless it is first cleared through the council of the Mahoning County Medical Society. Motion was passed.

The motion was made by Dr. Anderson, and properly seconded, that the question of the Diabetic Chapter now be referred to the Diabetic Committee of the Mahoning County Medical Society for further study and that the chairman coordinate the committee's decision with the Screening Committee and bring back a report and recommendation to Council at the October meeting if possible. Chairman of the Diabetic committee is Dr. Corredor.

Dr. Pichette made a report as councilor of the Sixth District. He explained the circumstances of his election to the office of councilor. He will explain the facts in a mailing that he will send out to all members of the Sixth District. He also announced that OSMA is seeking to supervise post-graduate educational programs in Ohio.

A letter from the Ohio Department of Health concerning a hemophilia program was referred to Dr. Tandatnick, chairman of the Government Medical Care Committee. The letter contained the outlines of a state-wide proposed program.

A letter from Dr. Lewis K. Reed was read in which he recommended that a representative from the Mahoning County Medical Society be appointed to the North East Ohio Region Council on Alcoholism. Dr. Melnick will make an appointment.

A letter was read from Mrs. Kathleen Dimoff, Mahoning Valley Dietetic Association concerning a Diabetic Fair that they are planning for Nov. 17. The secretary was instructed to write to Mrs. Dimoff and suggest that she talk to the Diabetic Committee chairman, Dr. Corredor, about the plans.

A letter from O. T. DiLullo of the Narcotic Strike Force Unit was noted in which he outlined a pharmacists warning plan for stopping forged prescriptions.

A letter was read from Dr. McDonough calling attention to the Pennsylvania Blue Shield form which incorporates in fine print the following statement: "I agree that I will accept as full payment the lesser of my charge as shown hereon; or the amount payable according to the applicable Fee Schedule Program (for under-income Subscribers) or Prevailing Fee Program." He wished to call this to the attention of all members and ask the Medical Society opinion. In discussion, Council members pointed out that if a physician does direct billing and uses the Mahoning County Medical Society approved form, then it does not matter what is printed on an insurance company form.

A request was noted from the Sebring Area Growth Association, Inc. asking that the Mahoning County Medical Society sign a "Certification of Need for Assignment of Health Personnel by the National Health Service Corps" to help them get another physician in the Sebring area. The executive secretary reported a phone call to Dr. Davies, our member in Sebring, who knew about the Association plans and who personally wants another physician to give him help in his area. Council directed the president to sign the certificate.

Dr. Melnick reported on the annual meeting of the Mahoning County Medical Society Foundation. Two loans of \$500 were made, both to third year medical students. Only two applications had been received that could be approved. A third application was apparently from outside Mahoning or

Trumbull County. The loans were given to: Martin F. Earle, George Washington U., and Roy J. Sartori, Chicago College of Osteopathic Medicine.

Mr. Rempes brought up the problem of the Boy Scout's request for doctors to do a recheck at their camp all during the summer and the fact that doctors did not think it is necessary, inasmuch as most boys already had physical exams. Following discussion, the motion was made by Dr. Anderson, and properly seconded, that a letter be sent to the Boy Scouts explaining why we don't think that medical rechecks at camp are worthwhile and that if they have a boy who needs an exam and can't afford to get one we will try as the Mahoning County Medical Society to get him examined. Motion was passed.

Dr. Anderson brought up the question of the current relationship of the Mahoning County Medical Society with osteopathic physicians. Dr. Pichette noted that the osteopathic associations within the Sixth District are cooperating with us in opposing PSRO. It was also noted that osteopaths may join the Mahoning County Medical Society, the Ohio State Medical Association and the American Medical Association if they so desire to apply and are accepted in the usual manner. They have, at various times in the past, been invited to attend meetings of the Mahoning County Medical Society.

Dr. Melnick announced that he has contacted 20 persons who have accepted appointment to a Mahoning County Medical Society ad hoc peer review committee, and that the chairman is Dr. Anderson and the Vice Chairman is Dr. Deramo. The motion was made by Dr. Abdu, and properly seconded, that the committee appointed by Dr. Melnick be accepted by the Council and that the committee be given authority to act as peer review for the Mahoning County Medical Society and have the power to act for the Society and to be solely responsible to Council. An amendment was made by Dr. Tandatnick, and properly seconded that the committee never give reports to any third party. The amendment was passed. The amended motion was passed.

Meeting was adjourned.

Howard Rempes
Executive Secretary

LEUKEMIA LECTURE IN NOVEMBER

Arrangements for the "First Annual Leukemia Society — Youngstown Hospital Association Lecture" are in progress under the direction of Dr. Lawrence M. Pass. Speaker will be Edward S. Henderson, M.D., Buffalo, who is Chief of the Department of Medicine at Roswell Park Memorial Institute and Research Associate Professor of Medicine at the School of Medicine of State University of New York at Buffalo.

All members are asked to hold open the date of Thursday, Nov. 21st, for two lecture hours. 8:00 a.m. to 10:00 a.m.

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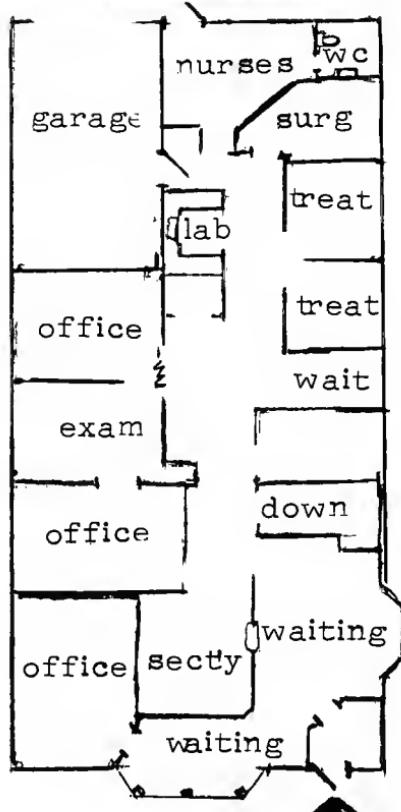
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Enteric-coated potassium salts may cause small bowel stenosis with or without ulceration. Hyperkalemia (>5.4 mEq/L) has been reported in 4% of patients under 60 years, in 12% of patients over 60 years, and in less than 8% of patients overall. Rarely, cases have been associated with cardiac irregularities. Accordingly, check serum potassium during therapy, particularly in patients with suspected or confirmed renal insufficiency (e.g., elderly or diabetics). If hyperkalemia develops, substitute a thiazide alone. If spironolactone is used concomitantly with 'Dyazide', check serum potassium frequently—both can cause potassium retention and sometimes hyperkalemia. Two deaths have been reported in patients on such combined therapy (in one, recommended dosage was exceeded; in the other, serum electrolytes were not properly monitored). Observe patients on 'Dyazide' regularly for possible blood dyscrasias, liver damage or other idiosyncratic reactions. Blood dyscrasias have been reported in patients receiving Dyrenium (triaterene, SK&F). Rarely, leukopenia, thrombocytopenia, agranulocytosis, and aplastic anemia have been reported with the thiazides. Watch for signs of impending coma in acutely ill cirrhotics. Thiazides are reported to cross the placental barrier and appear in breast milk. This may result in fetal or neonatal hyperbilirubinemia, thrombocytopenia, altered carbohydrate metabolism and possibly other adverse reactions that have occurred in the adult. When used during pregnancy or in women who might bear children, weigh potential benefits against possible hazards to fetus.

Precautions: Do periodic serum electrolyte and BUN determinations. Do periodic hematologic studies in cirrhotics with splenomegaly. Antihypertensive effects may be enhanced in postsympathectomy patients. The following may occur: hyperuricemia and gout, reversible nitrogen retention, decreasing alkali reserve with possible metabolic acidosis, hyperglycemia and glycosuria (diabetic insulin requirements may be altered), digitalis intoxication (in hypokalemia). Use cautiously in surgical patients. Concomitant use with antihypertensive agents may result in an additive hypotensive effect.

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*E.D. Freis: The Modern Management of Hypertension, V.A. Information Bulletin, 11-35.

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